STINUE	FROM REVERSE SIDE CANDIDATE NAME: Ha	n JCh Man Soffice sought:	Mayor	
RCULAT	OR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/H VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/H ER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN / THAN ONE CANDIDATE.	E PERSONALLY WITNESSED EACH SIGNATURE.		
FICE SE SLY	SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
	SICH STATE STEPPEN	RESIDENCE 24	4/9/16	
12.	SIGN KU. COLL	RESIDENCE / 1/9 1 WYGG AR	4/9/10	
13.	SIGN - FETT	RESIDENCE /7 19 Av UHIT Av.	4/9/6	
14.	SON FRIED SORENSEN	RESIDENCE 3107 Grantlend Dr	APV 10/	b
15	SIGN LEWIEN WAYK	RESIDENCE 421 N PSURVANA 20	April	ACCUL-COTOCK, ACRECO-PURSIONE CORRECTION CONTROL CONTR
16.	SIGN Blanny / haites	RESIDENCE 2923 FLOYD AVE	4/10/16	accessment scheme
	SIGN WILL SIGN WITH SIGN W	RESIDENCE 3200 E Navod AVE 471.	4/0/16	(
18.	BRIDE ENVOID NEVER	CITYTOWN LICHMOND 1/4 23221 RESIDENCE 5413 Panx A	1/10/4	
D.	SIGN MA A Kiju	RESIDENCE 2415 CWOVE AVEC	226 CE 416/4	5
20.	PRINT LICS MAKIFIZON SIGN ATT TO THE	RESIDENCE POL W. Liwraster Pol	232 U/W	20
	SIGN STORME PERCYLYAN	RESIDENCE 1215 Williams burn	12 1/1 2 Ave.	SAP property tecoms
חתכ	1 )	CITYTOWN RVA 23231	4/10/1	764252¢5
A888	s is 32 (99 Value)  in the County/City/Town of each States of America; (iii) I am not a minor; (iv) I am not a signature of each person who signed this page of conshable by a maximum fine up to \$2,500 and/or impri	t a felon whose voting rights have not been restored or its reverse side. I understand hat falsely signing	monwealth of egal resident of i; and (v) I	-VA
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	Commonwealth of Virginia Reg. 67927162 App. 67927162 App. 67927162	trument was subscribed and sworn before me this  LULE L. 20 / C. by  RSON CIRCULATING THE PETITION	;	
2 p ] (/	es 15 CT-4 SECT-58 PERSON ANT-CRIZED TO ADMINISTER OAT adv Addice: The Code of Virginia, 98 24:2-508 and 24	.2-521, authorizes requesting the last four digits of	your social sec	curity number to facilitate
288 236	ady natice: The Code of Virginia; <del>3§ 24:2</del> -506 and 24 cking this petition with the official voter registration re rg so. The State Board of Elections or the General Reg social security number or part thereof.	ecord. You are not required to provide this information	ation and may	sign the petition with

SBE-506/521 REV 1.2013

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	-	111711		enter distri	ol no.: (optio	73ij.
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oido	of thi	COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN	_ `	pages ma	y be circulated.	The circulator of
abov	re in i	s page, do hereby petition the above named indivioual to be the [check only one]		a legal res	ident of the Uni	on who is her\him led States of Amer
		General Election D Special Election Democratic Prin	1 ~			r a felon whose n restored. The
		on the <u>STA</u> day of <u>NGU</u> er name be printed upon the official ballots to be used at the	, 20 <u>l.( )</u> , and we do further petition election.			r <u>or affirm in the</u> By witnessed the
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Ł,	3.	sign (	RESIDENCE / S.C. C. T. C. E.		a 1, /,,	
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	<b>∕</b> 5.	sign mandle	RESIDENCE/208 BROCK	ANd	Plan ( 4)	7
P		PRINT MARY L ChANdlie	CITY/TOWN R. Ch. V/f 2	322	1 / /6/1	
Ø,		SIGN Can: M/17	RESIDENCE 1911 V Mai 7	21	$\lfloor M_i L_i \rfloor$	
1	0.	PRINT Carrie M. Houser	CITY/TOWN RICHARDER	1/1/2	7/2/16	
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K	8.	PRINT ARTHUR WOODWARD	Piculation N 11A		196/16	
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1		PRINT MARY HENDERSON	CITYTOWN PICT MOU à	కవా చి	1	)

COMMONWEALTH OF VIRGINIA

\* Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facili checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without d so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing social security number or part thereof.

ATURE OF PERSON CIRCULATING THE PETITION CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER going instrument was subscribed and sworn before, me this Liss Anne Cosby NOTARY PUBLIC Commonwealth of Virginia Reg. #7527182 20/12, by 19 (12/12 PRINT NAME OF PERSON CIRCULATING THE PETITION HOTARY REGISTRATION NUMBER\* DATE NOTARY COMMISSION EXPIRES\*\* SBIZED TO ADMINSTER CATHS The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate

nacking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without and so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing A read a security number or cart thereof.

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ENTER	R AB	OVE, OFFICE SOUGHT MAYOR	ENTER ABOVE, DISTRICT, IF APPLICABLE		er of signatures i	by congressions: pist
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$ \zeta $	3.	sign + Sant Jun-	RESIDENCE / E Marshall	57	1/2/.	
۲	υ,	PRINT Baielle Warniele	CITY/TOWN Richmond	23219	TIME	Startyjan ominingarjanana, distributed
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Ϋ	5.	SIGN Council Victor React	RESIDENCE 1100 INC + Bond 5	5/-		: !
Y	٠.	PRINT Laurel Deffenbaus!	CITY/TOWN RICHAR INC. 233	20	14/10/16	· ?
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ίλ L	8.	PRINT Julie Guild Samt	CITYTOWN HEAT. CO V923		7/11/16	
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		MANAGER OFICE	CITYTOWN KICHMOND	23227	37/1/16	7
ap appear	*		CONTINUE ADDITIONAL SIGNATURES	AND COM	PLETE AFFIDA	VIT ON REVERSE S

COMMONWEALTH OF VIRGINIA

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		SIGNATURE OF REGISTERED/VOTER	RESIDENCE ADDRESS House Number and Street Name of Rural Route and Box Number and City.		January 1 of election year]	SOCIAL SECUNUMBER
	. 1.	SIGN Cohelia Al bejo	RESIDENCE 1217 IRBY DA	?		
3		PRINT Ophelia Anni lare	CITYTOWN KICHMOND, UF	}	5-68	
C/	2.	SIGN The Thirty	RESIDENCE	-		
1		PRINT	C:TY/Town			
Q.	3,	SIGN May & Jun	RESIDENCE 1218 INDI	· · · · · · · ·	5-22-	
1		PRINT Mary F. Jones	CTYTONIA Chury 142			· · · · · · · · · · · · · · · · · · ·
0	4.	SIGN CYTHIAT White	RESIDENCE DOBUK 7556	74524	5/22	
1		PRINT CYATURA WHITE	CHYTTOWN RICH LA 232	36	: •••••	·
1	5.	SIGN L	RESIDENCE 1212 1-by D.C.		! •	3
X		PRINT Regionald Lewis	CITY/TOWN PICK VA 232	25	5/22	
2	6.	SIGN Perny Yelimmaly	RESIDENCE 1200 EZERY	'nιχ		
L		PRINTED To Long	CITY/TOWN 121 Ch 12 Z	7225	5/22/12	
Ą	7.	SIGN DUMM GARLEST	RESIDENCE /// F. I. F. J. K. J. X.	2R_	5/,	
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J.	9.	PRINT The exclose Bilow	CITY/TOWN Probables	15 1277/	15/22	<u> </u>
0		SIGN MOYIL Hawken	RESIDENCE RICLINENA.	2377	+ 5/	
Ŋ	10	PRINT Marin Hanly	CITY/TOWN 55/ 1/2 22 22 22	1.3	4 72	-

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERS \* Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition witho so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column contain social security number or part thereof.

SBE-506/521 REV 1.2013

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12 SIGN THAM SAME	RESIDENCE 1701 May W	<i>-</i> -/	
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15 SIGN SIGN EStyp	RESIDENCE 1366 K-Swickle	25/	
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18. SIGN	RESIDENCE 1314 17 RUE		
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SIG'I	RESIDENCE 1319 128Y DRIVE	5/20	
PRINT VICKI KOLAR	CITYTOWN RICHMOND, VA 23225	2/28	A CENTRAL CONTRACTOR OF THE CO
18. 53. T Eventy ME 260	RESIDENCE 15/3 LEBY DA	3 5/12	
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PRINT/MENTHE HERELAND	E CITYTOWN CITY W 23225	-	2 names
10. Sign Styles ()	RESIDENCE 1224 1, by Prime	5/22	
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5:3	RESIDENCE 1217 Ir by Dr	15/2	
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monwealth of Virginia  Alan Schintzius	- AFFIDAVIT -	المعادة المعادية	T647579
Virginia Sin the County/City/Town	of Richmond ; (ii) I am a	monwealth of legal resident of	CIRCULATOR'S DRIVER LICENSE NUMBER, IF APPLICABLE
nited States of America; (iii) I am not a minor; (iv) I a ssed the signature of each person who signed this p / punishable by a maximum fine up to \$2,500 and/or	m not a felon whose voting rights have not been restora age or its reverse side. I understand that falsely signing imprisenment up to ten years	d; and (v) I this affidavit is a	
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The foregoig	ng instrument was subscribed and sworn before me this ay of Mully 2016, by	•	
multi-	OF PERSON CIRCULATING THE PETITION COMM	icetta Irene Cl. NOTARY PUBLI nonwealth of V Reg. #7037191	c rginia
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			Richmond	_ signed hereunder or on the reverse	the same	page of the pe	y law need not be lition Numercus	,
			COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME C= TOWN s page, do hereby petition the above named individual to be	come a candidate for the office stated	each page	e must be a pe	. The circulator ( rson who is her\h	
al			he [check only one] General Election D Special Election Democratic Prin	mary 🔲 Republican Primary	and who i	s not a minor n	niled States of An or a faion whose	
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L	,		PRINTS) WETELL!	CITY/TOWN ACCULATION	3235		1	
C	1	2.	SIGN 7	RESIDENCE 4 1 DOMESTIC FOR	<u> </u>	725%		
1	1		PRINT Thomas Fitzpadask	CITY/TOWN - COMMAND AND THE	1,20	-	·	
ĵ.	Ų	3.	SIGN Meling 24 Rome	RESIDENCE BLEL BLITCHED DO	<u>.</u>	<u> </u>	) -	
L	*		PRINT KICKHERE F. ROTICE	CITY/TOWN R. CITICENT		17/72/11		
	1	4.	SIGN	RESIDENCE CONTRACTOR STATES	72	1-/50/-	: 1 * * *	
	4		PRINT MANUAL VASOULE	CITY/TOWN 1 1/1 1 2 23	ri5	5/4 (- )	-	
(		, 5.	SIGN R Ft	RESIDENCE 5 N ROBINSON		1		
	1		PRINT KOSEMARIE STUDER	CITY/TOWN PILENIEDNE		1562/16	, ° 	
(	١	6.	signalle Litter	RESIDENCE 7/9 841/ 24	ر رئ <del>ا</del>			
	4	U.	PRINTING 1 Merie VIII a - 1740	CITY/TOWN RUM = 522		>	; ;	
	7	7	SIGHT MANA 1 JOHN	RESIDENCE 1809 GROVE A	(= 1)	19_		
Name of Street	1		PRINT WIANA LONDO	CITY/TOWN ROMANICAD &		7:		
			SIGN	RESIDENCE 2005 Secretaria	i	13/ /		,
	Y	8.	PRINT Liverice 200 LINEARY	CITY/TOWN Pression 23		= /2e/ <sub>/k</sub>		
	<u> </u>		SIGNIFICATION A SLOCKER	RESIDENCE JULIANA Rd.	<del>de de la contenta de</del>			~
	1	9.	PRINT A ATHERSINE H SHIRHERS	CITY/TOWN & C. C. KING.	5 × 24	742213	:	
Sec.	0		SIGN A Mall		<u> </u>		ه عند	==
	4	10.	PRINT PETER N HOLLICA	RESIDENCE 4015 DINSIES AV		5/20/16		
- 1			■ PRINT TELETE IT FUNCLIAM	TONYTOWN POLICEPUND LAKE	フジィケ	1 0		

SBE-506/521 REV 1.2013

<sup>\*</sup> Privacy notice: The Code of Virginia, \$§ 724:2-506 and 24,2-521, authorizes requesting the last four digits of your social security number to 5 checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column contain social security number or part thereof.

		Alan Schintzius	· JA managaran		MMONWEALTH TION OF VOTE	QUALIFIED
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			We			ndudes more than ested that you us
NTER	ABC	Richmonal Uq'	23222	separate o	eillion form for other city to facilitate	qualified voters in a the processing of
NTER	R ABC	DVE, CITY/TOWN  MAYOR	ENTER ABOVE, ZIP + 4	to facilitate	the processing	petitions in county of the filing of your
ENTER	R ABO	DVE, OFFICE SOUGHT	ENTER ABOVE, DISTRICT, IF APPLICABLE		er of signatures ( of no.:lopt)	by congressional Cit chal).
side o	of thie in t	pualified voters of the district in which the above candidate  COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN s page, do hereby petition the above named individual to be the [check only one]  General Election	signed hereunder or on the reverse come a candidate for the office stated many  Republican Primary 20 6, and we do further petition	the same pages ma each page a legal resand who included a legal resand who included affidavit till	page of the per y be circulated, e must be a per sident of the Un sinot a minor na his have not be also must swee	law need not be: Illon. Numerous The circulator of son who is herbin; Illed States of Ami or a felon whose en restored. The ar or affirm in the alty withessed the
CIRC		TOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVER MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BE NER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN A THAN ONE CANDIDATE.	EN RESTORED AND THAT SIME PERSONALLY WITH	NESSED EAC	H SIGNATURE	
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orano (m.		SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	House Number and Street Name o Rural Route and Box Number and City/		of election year]	NUMBER
	1.	SIGN	PESIDENCE // W. Leg	357	5/36/16	
*		PRINT Scott Andrews	CITYTOWN RICH MONDY	F 3		<del>CENTY</del>
Ų,	2.	SIGN KG	RESIDENCE 4271 Iamphyh.	w Ct.	5/2/11	
<i>'Y</i>	-	PRINT MSWanna Latsinge	CHYTOMN KILLIMETEL, VA 2	- January 100		
M	3.	SIGN JULU 12 COLO	RESIDENCE 31 NOTO BY 1508		>1271	
Q Q		PRINT / TUTCE STEPLY TO	CITYTOWN RICHITICALL	<u> ۱۸ زن ۱۸</u> ۱۸	<u></u>	
6	4.	SIGN WAILIGUM L BROYT IT	RESIDENCE 2529 FIGH ,	41, + 4.6	72414	·
X	5.	SIGN Matthew Lurie	RESIDENCE 2216 4050 L	Jesal 1	5/26/K	A TO THE PROPERTY OF THE PARTY
þ	6.	San AS	RESIDENCE 307 Stock	) Hegy 5	54-16	-
		SIGN Ciller	RESIDENCE HIS GITMA	- L	5/26/kg	: ************************************
V.	7.	PRINT Carl Kranz	CITYTOWN PATCHMOND	VA	- NOWING	
X	8.	SIGN DYM (00,02-	RESIDENCE 306 M. 26 SI	<u> </u>	3/26/16	
Š	ģ.	SIGN A M	RESIDENCE 700 Lu 3/3"	`S.~	15/2/6	ing may not act and a second residence of the second r
		PRINT Allisa Hadrens	RESIDENCE 2312 STratton			
Y	10.	PRINT MARINATER TOUR CS TON	CITYTOWN RICHMUT &		3 3/3/	у. Иъ

PRINT MARING PRESIDENT CASTON CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE \* Privacy notice: The Code of Virginia, §§ 24/2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to is checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column contains social security number or part thereof.

CITY/TOWN

Ivacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate eaching this petition with the official voter registration record. You are not required to provide this information and may sign the petition without and so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing social security number or part thereof.

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MECO		000	. VR	county or	oty this sugg	noudes more than ested that you ut	
NIER	ABC	ve, residence address of candidate  Richmond Uq'	23222	pounty or		ane blocessud o. onswed Actes w	
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		MAYOR		וכ לפטי ופופ	the processing	of the fing fired By Congressional D	
NTER	ABC	VE, OFFICE SOUGHT	ENTER ABOVE, DISTRICT, IF APPLICABLE		:		
side of above 7	this in t	ualified voters of the district in which the above candidate  COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME C= TOWN s page, do hereby petition the above named individual to be he [check only one] General Election  Special Election  Democratic Print on the	signed hereunder or on the reverse come a candidate for the office stated mary Republican Primary 20 6. and we do further petition	the same pages ma each page a legal resigned who involing right circulator affidavit the page of the same pa	page of the per y be pirculated a <u>must be a per</u> sident of the Un sinct a minor n ats have not be also must swee	riam need not be liften. Numerous The ordulator of sheriki field States of Amora felon whose en restored. The arch effirm in the later witnessed the	•
		OR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVEI MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BE VER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN / THAN ONE CANDIDATE.	EN RESTORED AND THAT SIME PERSONALLY WITH	NESSED EAC	H SIGHATURE.		
OFFICE USE ONLY	-	SIGNATURE OF REGISTERED VOTER	POST OFFICE BOXES ARE I ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name o		DATE SIGNED [Must be after January 1 of election	"SEE 4C7E SEL LAST 4 DIGITS SOCIAL SECU NUMBER	
	4	[PRINT NAME IN SPACE BELOW SIGNATURE]	Rural Route and Box Number and City:		yeari	[2PT'2]12]	
1/1	.	SIGN GOVE VED	RESIDENCE 3206 U. Frant/10	<u>ا اگ</u>	5/14/16		
/y		PRINT Jacob, Vowejhan	CHYTOWN LINEAUITY VA 2	1221		ويورون ملافوسكان سندن ثعدانة	
Y 2		SIGN JA	RESIDENCE 3114 FILWOUTH AU	૯	الماليان المالي		
		PRINT JOH GOVEN	CITYTOWN RICHMAN TO 14 3	3221	5/14/16	and a state of the	
Û s	3.	sign DONG(DONG) ONO	RESIDENCE 3114 ENWOYT AL	ર	5/14/10		
		PRINT JENNO HAPETITE	CITYTOWN MCINING VA				ı
0/2	1	SIGN KAVUY ST. KEWY	RESIDENCE 31/4/ C/1126671	w	<i>-</i> 7	• •	
$\checkmark$		PRINT KENNIG ST. DKWG	CHYTOWN ERTITIONS 1/2	23271	714/16		
0	5.	SIGN CHARAGO (I GOA)	RESIDENCE 3139 Ellwood AVI	2 ()	Shul	•	
Y		PRINT AMANDA CIELAND	CITYTOWN RICLUMING VA	23221	116		
2	6	SIGN MAN MILL	RESIDENCE III E CI-; St		5/14/16	: ; ;	
5		PRINT Mitch Kerdelle	CITYTOWN Rachment 14	23215	17/1/18		,
1	7.	SIGN Alone C. Men	RESIDENCE 1420 Nottaux	Ave	5/14/16		
8V		PRINT Alda CMiles	CITY/TOWN RICHMOND, VA J	3127	7/1/14		
X	8.	SIGN MILLS	RESIDENCE 1420 Not10Way	Hie	5/11/16		
<b>/</b> X		PRINT Phil Ford	CITY/TOWN Richitherid, Lift -	73207	1	Marie Ma	
Q	9.	SIGN MOVIAN NIKE	RESIDENCE 1100 S. RUYC		l Iguil	VIII!	
		PRINT MORIAN NITES	CITY/TOWN RVH	1	1714	167	
2	10.	SIGN Drawleng Andel Sinc	RESIDENCE 959 MYERS	S ST.	5/		•
y		PRINT MARITANA ANDERSON	CITY/TOWN RYA		114/14	9	

SBE-506/521 REV 1.2013

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VOTING RIGHTS HAVE NOT BEEN RESTORED AN SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE THAN ONE CANDIDATE.	OW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERIC ND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE, YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CAND		5
FFICE USE USE USE USE USE USE USE USE USE US	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
SIGN INT Walnut	RESIDENCE 2218 POPUL DE STRUCTURA REMARKA (N. 2322)	3/14/16	
12 San Cyle Pader 3en	RESIDENCE 1834, Bote tourt DITY/TOWN Lichmond, Va 232	5.15	
BIGH CANANA	RESIDENCE 7221 BERJICK RD	9.5	C\
14 Sea Beard	RESIDENCE 1902 Carter St	5/15	
FRINT KECCO AMOS	CITY/TOWN RICLAMOND VA	3/17	<i>(</i>
18 SIGN Clim From	RESIDENCE 2409 Facusina yaya	Company of Commission of Commi	en estrourd des
son Fat Sound	CITY/TOWN Pick now VA RESIDENCE 316 L Porter St.	-1169	Maranda (Maranda)
SENT - MILL LINE	CHYTOWN RICLYALLIZE VIA	5/16	workstated and
18 133/1214	RESIDENCE CITY/TO://N	5/16	gaalin 4: poordatiin i Balle
Josh Dork	PESIDENCE 5232 Kassalds	5/16	
20 530 J. Cachiaretti	PESIDENCE 307 State for	3/16	-
2 sak	FESIDENCE 307 5/gi Kita 7	5/14	emploration Photos
mmonwealth of Virginia  Alan Schintzin	CITY/TOWN 17 \Ch. Na. c.l.  - AFFIDAVIT -  , swear or affirm that (i) my	full recidential	TW/75 275g
ress is 337/ Garland  Virgina in the County/City  Usited States of America: (III) Lam not a minor (	Town of Rich Mond in the State/Con Town of Rich Mond (ii) I am a  iiv) I am not a felon whose voting rights have not been restore	nmonwealth of legal resident of ed; and (v) I	LICENSE NUMBER, IF APPLICABLE APPLICABLE
essed the signature of each person who signed ny punishable by a maximum fine up to \$2,500 a	this page or its reverse side. I understand that falsely signing	this affidavit is	a NAME OF STATE THAT ISSU THE CIRCULATOR'S DRIVER (ICH CENSE
DE PROTOGRAPHICALLY REPRODUCIBLE  MOTARY SEAL/STAMP BELOW  State C	SIGNATURE OF PERSON CIRCULATING THE PETITION  OF URGERIE County/City of Rechn	wb	CIRCULATOR'S LAST 4 DIG OF SOCIAL SECURITY NUMBER
319	regoing instrument was subscribed and sworn before me this by day of, 20 6 , by	Princetta Trane	Člarke
	NAME OF PERSON CIRCULATING THE PETITION CO.  NAME OF PERSON CIRCULATING THE PETITION  NAME OF PETITION CIRCULATING THE PETITION	MOTARY PUB emmonwealth o Reg. #7037 mmission Expir	iLiC f Virginia 191
TURE OF NOTATION OR OTHER PERSON AUT-OPIZED TO AD	NUMBERS DATHS NOTARY REGISTRATION NUMBER** DATE NOTARY COL	MUSSION EXPIRES** f your social sec	curity number to facilitate

tracy notice. The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate record, this petition with the official voter registration record. You are not required to provide this information and may sign the petition without ong so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing systems, security number or part inspect.

		Alan Schintzius	1977 A		MMONWEALTH TION OF VOTE	QUALIFIED
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ENTER A	ABO	MAYOR	enter above, zip + 4	to fecilitate	the processing	s patitions in county of the fling of you in
ENTER A	ABO	OVE, OFFICE SOUGHT	ENTER ABOVE, DISTRICT, IF APPLICABLE		ir or signalures : cl no (ept	oy congressions Is chai)
side of above to be h	thi in i	ualified voters of the district in which the above candidate  COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME CF TOWN s page, do hereby petition the above named individual to be the [check only one] General Election  Special Election  Democratic Print on the	signed hereunder or on the reverse  come a candidate for the office stated  nary   Republican Primary , 20  , and we do further petition	the same pages ma each page a legal res and who is voting rigit circulator affidavit the	page of the pet y be circulated, a must be a per sident of the un sinct a minor n his have not be also must swet	rlaw need not be cition. Numerous ition. Numerous ition of the circulator of son who is herthin ited States of Ame or a feion whose en restored. The arch effort in the aity witnessed the
		TOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVEI MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BE NOR: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN A THAN ONE CANDIDATE.	EN RESTORED AND THAT SIPE PERSONALLY WIT	NESSED E40	H SIGNATUPE.	ATES OF AVERGS. N
OFFICE USE ONLY		SIGNATURE OF REGISTERED VOTER	POST OFFICE BOXES ARE ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name of	and the property of the proper	DATE SIGNED [Must be after January 1 of election	TSEE YOTE BELC LAST 4 DIGITS SOCIAL SECUP NUMBER
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<b>P</b> 2	,	SIGN SIGN	RESIDENCE CURIN 24+0	n II		er ganzatur gerina gerina era era era era era era era era era er
۴		PRINT Talker Cocknilia	CITY/TOYIN RVA 232	23	5/15/16	gilleri-ågrödlitmetiken mangera
9,3	3.	SIGN 5	RESIDENCE DITTORES	7-771	6/10/11	
<i>'Y</i>		PRINT DENSE EINIS	CITY/TOWN LICHMIND, UT L	-	5/15/16	
	4.	SIGN OF CONCINENT	RESIDENCE 3508 FELO	(all	(City	: : : : :
.)	-	SIGN (FIN BREZZ -	RESIDENCE 4810 KENSING	tou the	t	CONTRACTOR OF THE PROPERTY OF
	5.	PRINT KMY Brachman	CITYTOWN RICHM Cheliv		;	
	6.	SIGN M. CAMP	RESIDENCE 1010 CW. 42nd	St	5/15//	
Н		SIGN Rand Miles	RESIDENCE 4817 Phase to	A	1.700	<del>December 2000</del>
M	7,	PRINT ROUSE GUEFIN	CITY/TOWN RICH MUNC! V	P	15/15/16	•
4	8.	SIGN 1	RESIDENCE 450 2 NOWY		ルカシ	
	9.	PRINT JERG, CC. Rosentery	RESIDENCE LOLL STATE	MILES	100 //	
14	<b>ਹ</b> .	PRINT ED MARIEN	CITY/TOWN DTWA	a	5/4/4	
$\frac{1}{2}$	10.	SIGN CHECKEN WOLF	RESIDENCE PICULANO	,	5/16/16	- -
		FRING C VECUS LATS " VUCIC L	CITYTOWN IS I'LL A ESPETZ	رے ا		

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	ATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/H VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/H BNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN A THAN ONE CANDIDATE.	E PERSONALLY WITNESSED EACH SIGNATURE.		
FFICE USE DNLY	SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER IOPTIONAL
11	BIGN LESSIF STAR KELLEY	RESIDENCE 87 TRBY TR CITY/TOWN RICHWAYA VA	5/14	
12.	SIGN AUTO CAMPA	RESIDENCE (SO) KAWITA S &	5/15	2
) 13	SIGHT FORK	RESIDENCE/10/COR/SOLDAY	5/10	Control Williams (Control Control Cont
14.	SON Margart boll	RESIDENCE 101 Carliste te	5/1+	STATE
153	Sign Coll Culled	RESIDENCE 1901 CedryhorstD	E 5//5	hand Contaction
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17	FRANT WEST PIG NU.)	RESIDENCE 1010 LU . (1200 S CITYTOWN HILL 3356	3/15	2
18	539/ /-	RESIDENCE 1010 (C). 42 PS St CITY/TOWN Richman FAMILY	5 5/5	CORPAL PROMISE
10	EDI TAIL WA TOWN	RESIDENCE 21/3 Park Ava	\$15	Participa
. 23	133. Fail My	RESIDENCE 213 W 30th 5T	5/15	
2	size Till & Calife	RESIDENCE 57.5 & Cop of A. St	5/15	Scalar professors
	emonwealth of Virginia	AFFIDAVIT.	- Annual Control	-114757950
. 116	Atan Schintzius  1888: \$371 garland ave  Vira 1886 york CountyCityTown of	, swear or affirm that (i) my finthe State/Common (ii) I am a le	nonwealth of egal resident of	CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE
1.6	nited States of America; titli 1 am not a minor; (iv) I am not ssec the signature of each person who signed this page of purishable by a maximum fine up to \$2,500 and/or impri	or its reverse side. I understand that falsely signing t	; and (v) I this affidavit is a	
3	NOTARY SEAUSTAMP SELOW	ENATURE OF PERSON CIRCULATING THE PETITION  GIALA COUNTY/City of Rucha	Car	CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER
· · ·	PRINT NAME OF PE	RSON CIRCULATING THE PETITION  IN NOTARY REGISTRATION HUMBER** DATE NOTARY COMM	Commonwe Reg. # iy Commission iission EXPIRES**	Irene Clarke XY PUBLIC alth of Virginia #7037191 Expires 8/31/2018
	rivacy notice: The Code of Virginia, §§ 24.2-506 and 24 needing this cettion with the official voter registration reongly. The State Spara of Elections or the General Reging social security humber or part thereof	2.2-521, authorizes requesting the last four digits of	your social sec	Sign the petition willion

*OCTOTADIC	TOTE (FIELD OF THE PROPERTY OF
ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  ENTER ABOVE, CITY/TOWN  ENTER ABOVE, CITY/TOWN  ENTER ABOVE, OFFICE SOUGHT  ENTER ABOVE, OFFICE SOUGHT  ENTER ABOVE, OFFICE SOUGHT  ENTER ABOVE DISTRICT PARELICABLE  It is suggested that you is suggested that you is country or only to factivate the crock sample of signatures of signature of signatures of signatures of signature of sig	at you us yours of a county of
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<sup>\*</sup> Privacy netice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to fa checking this petition with the official voter registration record. You are not required to provide this information and may sign the cetiton without so. The State Board of Elections or the General Registrar, when copying this document for public inspection must cover the column content social security number or part thereof.

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side abov to be	of thire in t	ualified voters of the district in which the above candidate  COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN s page, do hereby petition the above named individual to be the [check only one] Seneral Election  Special Election  Democratic Print on the  Style day of  Special Election  Possesses at the	signed hereunder or on the reverse prome a candidate for the office stated primary Republican Primary , 20 and we do further petition	the same pages made each page a legal read who looking right circulator affidavit it	page of the per ay be circulated e must be a per sident of the Ur is not a minor n hts have not be also must swe	I law need not be re- ifien. Numerous The circulator of The circul
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		SIGNATURE OF REGISTERED VOTER  [PRINT NAME IN SPACE BELOW SIGNATURE]	House Number and Street Name of Rural Route and Box Number and City		of election year]	NUMBER [DPTIONAL]
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5	2:	SIGN SIGN	RESIDENCE 33/0 Fallure Ave	17/2		
X	۷.	PRINT J. BERTY COTOT	CITYTTOWN RICHMAN SILVA		1 3/10/16	Control of the contro
	3.	SIGN MULLINGE	RESIDENCE FEITS I'L & FIE		= 1/15	:
		PRINT Like Pulling Her	CITY/TOWN RICHIEL 1. 5.3	3337		
Y,	4.	PRINT N-ck W. Aberre	CITY/TOWN SOLUTION	de_	5/5/1/2	
Ų.	5.	SIGN KELLY LETTER COM-	RESIDENCE 3320 VV. (C) ACC  CITY/TOWN (210 h n 127 2)	S1. B	5/15/10	A COLUMN TO THE PARTY OF THE PA
Ù		PRINT Kelly Lonergan	CITYTOWN RIChnime	VA 3221	<u> </u>	
F	6.	PRINT EVAN MACKENFIE	RESIDENCE 22/2 PACKUE CITYTOWN FIX HITCUP. VA	رد تد. <u>ارا جان</u>	1 5/15/10	1 3 19
		SIGN LACKENOS	RESIDENCE 7321 Parlicu	CHARLES THE PARTY OF THE PARTY		
Y	7.	PRINT Christina Thunger	CITYTOWN 12/1/2001			i A
0	8.	SIGN . Tr	RESIDENCE PULL			
7		PRINT Ken Rayan	CITY/TOWN (C. 172)			The second secon
V	9.	SIGN ATT.	RESIDENCE 1900 (AV +C-	_		4 2
-		PRINT Katie MiBille	CHYTOWN RICLIANIZE 2			`. <del>'``````````````````</del>
1	10.	SIGN	RESIDENCE / 27/2005t.	for N	15/5/e	<i>*</i> ·

\* Privacy notice: The Code of Virginia; §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to it checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column contains social security number or part thereof.

SBE-506/521 REV 1.2013

PRINT NAME OF PERSON CIRCULATING THE PETITION
PRINT NAME OF PERSON CIRCULATING THE PETITION
PRINT NAME OF PERSON CIRCULATING THE PETITION
REGISTRATION HUMBER\*\* DATE HOTARY COMMISSION Expires 8/31/2018
PRINT NAME OF PERSON AUTHORIZED TO ADMINISTER CATHS NOTARY REGISTRATION HUMBER\*\* DATE HOTARY COMMISSIONERS 8/31/2018
PRINT NAME OF PERSON AUTHORIZED TO ADMINISTER CATHS NOTARY REGISTRATION HUMBER\*\* DATE HOTARY COMMISSIONERS 8/31/2018

vacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate social, this petition with the official voter registration record. You are not required to provide this information and may sign the petition without rigist. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing a social security number or part theract.

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ENTER	RABC	VE, NAME OF CANDIDATE (SHOULD BE AS IT IS TO A PEAR ON E	ALLOT]		filed with Decis	relion of Canodi
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		DVE, CITY/TOWN MAYOR	ENTER ABOVE, ZIP ÷ 4	to facilitate	e the processing	<u>ice of ce</u> e pelitions in coun of the filing lif vol by congressions' (
-		OVE, OFFICE SOUGHT	ENTER ABOVE, DISTRICT, IF APPLICABLE	enter distr	ot no [ost	onal]
side abov	of thire in the	qualified voters of the district in which the above candidate  COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME C= TOWN spage, do hereby petition the above named individual to be the [check only one] General Election Special Election Democratic Print on the GH day of Note where the printed upon the official ballots to be used at the	signed hereunder or on the reverse come a candidate for the office stated many Republican Primary 20 16, and we do further pelition	the same pages male ach page a legal read who voting figure affigavit i	cage of the call by be dirculated e must be a cer sident of the Units not a minor n his have not be also must swell	law need not billion. Numerous The piroulator son who is herit ited States of Proceedings on a fe'on whose an restored. The er or affirm in the aity witnessed the
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(y) (y)	3,	SIGN GANIT	RESIDENCE 4113 HILLE CITYTOWN (LILMINY)	NA	1/15/1	C.
f	4.	SIGN - CCC - CCCC PRINT JADA CAR KON	RESIDENCE 14/1 CARTEI	_	5/15/16	
CI	5.	SIGN HOTT	RESIDENCE SILK THUBLISH CITYTOWN THE 2	17100 3117	5/1	: ************************************
ρ.	6.	SIGN CAVIS GAVE	RESIDENCE 28/8/)MENTE (	11/1/2	5//5//	
	7.	SIGN ALLOW IN J	RESIDENCE 3408 J. Clar		7/15/10	
P	8.	sign & E	RESIDENCE 34 5 GEN/C	An	5/15/1	in in the second
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acy notice: The Code of Virginia, §§ 24.2-508 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate using this pestion with the official voter registration record. You are not required to provide this information and may sign the petition without § 33. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing social security number or part thereof.

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sid	e of t	COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN his page, do hereby petition the above named individual to be	pag ecome a candidate for the office stated each	ges may ch page	r be circulated o a se tsum	The circulator of son who is her hims:
ab	ove ir	the [check only one]	<u>zie</u>	egal resi	ident of the Ur	Wed States of Americ or a felon whose
to		General Election	voti	ing righ	ts have not be	en resiored. The
		ld on the day of her name be printed upon the official ballots to be used at the				ar or affirm in the ally witnessed the
					of each voier.	
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	5.	SIGN Margaret Circle	PESICENCE 1009 Catherine St.		r. lm. i.	
	J.	PRINT Margarete Rush	CHATOM RNA 23220	*********	4/26/16	
		SIGN	RESIDENCE			
energe de	6	PRINT	City/Tean			
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	G	SIGN	RESIDENCE			
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S. Carrier	9	SIGN	RESIDENCE			•
	Ĺ	PRINT	City/Tovik			
No.	1	SIGN	RESIDENCE			

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIL

<sup>\*</sup> Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facility checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without do so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing a social security number or part thereof.

Æ	SIGNATURE OF REGISTERED VOTE PRINT NAME IN SPACE BELOW SIGNATURE	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
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<b>40</b> 8	: PHOTOGRAPHICALLY REPRODUCIBLE NOTARY SEAL/STAMP BELOW	SIGNATURE OF PERSON DIRCULATING THE PETITION		3172 CIRCULATOR'S LAST 4 DI OF SOCIAL SECURITY
	State	of County/City of Facility of	<u>l</u>	NUMBER
	2.5	oregoing instrument was subscribed and sworn before me this day of, 20, by		
		Friendling . Rec. In	, 11 Proc	21.3
	PRINT	NAME OF PERSON CIRCULATING THE PETITION		

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-1-1	COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN	- ·	pages ma	y de dirau sted	The croulette .
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	d on the XTT day of 1016 in 1967 and at the ser name be printed upon the official ballots to be used at the	, 20 <u>16</u> , and we do further cetition election.			ar or affirm in the also witnessed t
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1 2	sign Rayre is show is sovale.	RESIDENCE 1800 DIAWILL	e Aire	÷	
\ <b>1</b>	PRINT LONGISMA FOODE	CATE By bound VE	2322	15-11-16	2
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\ <u>\</u>	PRINT homa Will aux	C-TOM9086166			
Y 4.	SIGN Locky Hardy	==50=105 2007 dimuddio	. Are	6-11-15	
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C) <sub>5.</sub>	SIGN Straven Smith	RESIDENCE 2016 DINWIC	1018 A		
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Q 6.	sign Chilly (Alekanie)	RESIDENCE 2016 ALVE	Udi E	Ghile	2011
	PRINT Phillipp HV (CC1)20	CONTOWN Schillen	, UA	17776	
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, ,	PRINT KAYAL MITTA	CITY/TOWN KICKINGOLD, VI	L	1/1/20	To the same of the
Y 8.	SIGN	RESIDENCE 2-304 Heili	CXAL	6/11/1	16
$\Delta$	PRINT EVOV Brightly	CITY/TOWN Richmond	VA	independing and a supplemental a	
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10	SIGN	RESIDENCE		<del>_</del>	t
	PRINT	City/Town			

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LATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT SHE PERSONALLY WITNESSED EACH SIGNATURE.

IGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE

SIGNATURE OF REGISTERED YOTER   PRINT   PRINT NAME BY SPACE SELOW SIGNATURE    PRINT   PRINT   PRINT	THAN ONE CANDIDATE.		: SÁLA Zagospaissalis Jugarias (ESTA perpenant	
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monwealth of Virginia  - AFFIDAVIT    Sie 33 7	SIGN	RESIDENCE		
### AFFIDAVIT - Swear or affirm that (i) my full residential circulator's provers size 33.7 Garla ha and the in the State/Commonwealth of in the State/Commonwealth of in the County/City/Town of Land whose voting rights have not been restored; and (v) I and each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years  PHCTOGRAPHICALLY REPRODUCIBLE SIGNATURE OF PERSON CIRCULATING THE FETITION  State of VISION County/City of Commonwealth of APPLICABLE COMMON DEFORM THE CIRCULATOR'S DRIVE IN The foregoing instrument was subscribed and sworn before me this NOTARY PUBLIC Commonwealth of Virginia Reg. #7037191  PRINT NAME OF PERSON CIRCULATING THE PETITION My Commission Expires 8/31/2018	PR.NT	City/Town		
see or affirm that (i) my full residential see is 37 Garland the in the State/Commonwealth of in the State/Commonwealth of in the State/Commonwealth of in the State/Commonwealth of ited States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I applicable understand that falsely signing this affidavit is a punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years  PHCTOGRAPHICALLY REPRODUCIBLE SIGNATURE OF PERSON CIRCULATING THE PETITION  State of VISION DEFENSION CIRCULATING THE PETITION  The foregoing instrument was subscribed and sworn before me this NOTARY PUBLIC Commonwealth of Virginia Reg., #7037191  PRINT NAME OF PERSON CIRCULATING THE PETITION  My Commission Expires 8/31/2018	nonwealth of Virginia	1	The second secon	T6475295/
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State of VLGINCA County/City of Rechand OF SOCIAL SECURITY NUMBER  The foregoing instrument was subscribed and sworn before me this Land County Public Commonwealth of Virginia Reg. #7037191  PRINT NAME OF PERSON CIRCULATING THE PETITION My Commission Expires 8/31/2018	sed the signature of each person who	o signed this page or its reverse side. I understand that falsely sign	ing this affidavit is a	THE CIRCUITATOR'S DRIVER
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acy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate oxing this petition with the official voter registration record. You are not required to provide this information and may sign the petition without ig so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing space security number or part thereof.

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NTEF	RABO	ALAN SCHINTZIUS VE, NAME OF CANDIDATE [SHOULD BE AS 7 IS TO APPEAR ON E 3327 GRANDIDATE [SHOULD BE AS 7 IS TO APPEAR ON E	4/2A	PETI (Mustice	VOTE Field with Decis	QUALIFIE
NTER	R ABO	VE, RESIDENCE ADDRESS OF CANDIDATE RICLMOND US	23222	county of separate of	Civil 3 sugg etion form for	
		NE, CITY/TOWN  MAYO [2  OVE, OFFICE SOUGHT	ENTER ABOVE DISTRICT IF APPLICABLE	i is sugge to facilitate the hymbe	י בר ממפספים פרון	s peritions in cour of the fing of you by congress onat the
side aboy to be that	of this	ualified voters of the district in which the above candidate :  COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN s page, do hereby petition the above named individual to be he [check only one] General Election	signed hereunder or on the reverse come a candidate for the office stated mary [2] Republican Primary, 20 142_, and we do further petition election.	All's gnatu- tre same i pages ma each cace a legal res and who ii voting righ groutator affidavit it signature	res required ay page of the pet y be discusted. It was not a per dent of the United Page 1 and 1	risw need not be ition flycherous. The proulator of son who is herifflitted States of Amore a felon whose or restored. The arror affirm in the ally witnessed this
CIR		TOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVER MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEINGER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN A THAN ONE CANDIDATE.	EN RESTORED AND THAT S/HE FERSONALLY WI	THESSED EAC	HISIGNATURE.	
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R	2.	PRINT Selwyma Thompson	and the second s	Ve_	.6/4/5	**************************************
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P	. 5.	PRINTS high tas. Lonn	CITYTOWN RICHMOND	nAve 4	6/1/4	
P	6.	PRINT FORDA WILLIAMS	RESIDENCE 2207 CIUC CITYTOWN RICHNICA L	10/19/1 11/232	Wall-K	**************************************
7	7.	PRINT JOAN LOVING	RESIDENCE 7707 90 CITY/TOWN RICH 250 V	rdan 1	6/11/16	
O Y	8.	AGN MANIA FRES	RESIDENCE 1/6 5 SERVICA  CITYTOWN RICHMEND V.A	rds Au	4/4/2	
	9.	SIGN PEARE Harris	RESIDENCE 3621 Being	501/Le	[ (c/1)	
1	10	SIGN PATTILL BANGE	RESIDENCE 2001/40	9/15 bg	9×6-11	/

<sup>\*</sup> Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to fact checking this petition with the official voter registration record. You are not required to provide this information and may sign the better without c so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing social security number or part thereof.

JUED FROM REVERSE SIDE CANDIDATE NAME: Alah	Schintziusoffice sought:	MAYOR	2 40P
LATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/ VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/ BIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN THAN ONE CANDIDATE.	IE PERSONALLY WITNESSED EACH SIGNATURE.		
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southfant funde	CITYTOWN RIGHTLY VO	Celila	
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Han Schintzys  SSS 18 337/ Garland Obe  Vita In a Jin the Count/City/Town of inter-States of America: (iii) Lampot a minor (iv) Lampot in the County City Lampot a minor (iv) Lampot a min	or a felon whose voting rights have not been restore	nmonwealth of legal resident of d; and (v) I	<u> </u>
issed the signature of each person who signed this page y curishable by a maximum fine up to \$2,500 and/or implementations.	or its reverse side. I understand that talsely signing risonmentup to ten years	this affidavit is	a NAME OF STATE THAT ISSUI THE CIRCULATOR'S DRIVER
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14-fa-day gi	110 Sch in +11115	Commonwer	(rene Clarke Y PUBLIC alth of Virginia 17037191 Expires 8/31/2018
THE OF NOT ART OR OTHER PERSON AUT-DRIZED TO ADMANISTER CA	THS NOTARY REGISTRATION HUMBER** CATE NOTARY CON	IMISSION EXPIRES**	
vacy notice: The Code of Virginia, §§ 24.2-506 and 2 ecking this petition with the official voter registration rung so. The State Board of Elections on the General Reig social security. Tumber or cert thereof	4.2-521, authorizes requesting the last four digits of	of your social second	SIGN THE DEVITION ANTHOUR

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		Alan Schintzius	L\ I \		MMUNWEALTH TION OF VOTE	QUALIFIE
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		Richmond La	23222	Solution of filling	city to facilitate	quaified voiers in the processing o
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NTER	ABO	IVE, OFFICE SOUGHT	ENTER ABOVE, DISTRICT IF APPLICABLE		er of signatures i	b, congressions o ;
side of above	f this	ualified voters of the district in which the above candidate and the state of the district in which the above candidate and the state of the country or city or, FOR TOWN COUNCIL, NAME OF TOWN spage, do hereby petition the above named individual to be the [check only one]	_signed hereunder or on the reverse come a candidate for the office stated	pages ma each page a legal res	page of the being to be of the circulated a must be a persident of the turn of tur	y law need not be ction. Numerous The proulator of rson who is heriba nied States of Am or a feton whose
to be t	held	Seneral Election Democratic Pringle on the KHL day of Note the best at the printed upon the official ballots to be used at the	_, 20 $6$ , and we do further petition	voting rigi circulator affidavit ti	nts have not be also must swei	en restored. The er or effirm in the ally witnessed the
		TOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVER MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEING YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWIN THAN ONE CANDIDATE.	EN RESTORED AND THAT SIHE PERSONALLY WIT	NESSED EAC	H SIGNATURE.	
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		SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	House Number and Street Name o Rural Route and Box Number and City/		of election year]	NUMBER [OPTICHAL]
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		PRINT telicia D. Cosby	CITY/TOWN TICLALLIAN		Selialis	-
2 3	3.	sign Muruc Bah	RESIDENCE OF THE	7	<u> </u>  C/10/16*  -	•
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X	4.	SIGN COLLA COLLA	RESIDENCE 2 / C J	1 F F ()		ेख जिल्हा
V	_	SIGN ALL ALLICE	RESIDENCE // IV	Ave	+- 6-10-	10
(X)	5.	PRINT Lecon Williams		Prin	w 23	:77
Q.	6.	SIGN Samuel Thabur	RESIDENCE 2700 21-	47	# N	
		PRINT SAM AND THE	CITYTOWN KILL ME IN I	VA	U	Digwedfighunden eine eine Freisbeiten Gegenter
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K	9.	PRINT REASONALT MCCOLL	CITY/TOWN IL CHANCE YICL V	<u> </u>	1/10 6	:
¢.	10.	SIGN of fla fall to	RESIDENCE 2001 E Gra	- ( e <sup>n</sup> .	- 1/10//	
$\Delta$		PRINT FUSTEN MITERIA TES	CITYTOWN C. Thrush =	114	0/ 17/0	· ·

\* Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to fac checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing social security number or part thereof:

วหฑิธย	ID FROM REVERSE SIDE CANDIDATE NAME: Alg.h.	Schintziusoffice sought:	MAYOR	2 41B
IRCULA SIG	TOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/H VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/H NER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN A THAN ONE CANDIDATE.	PERSONALLY WITNESSED EACH SIGNATURE.		
FFICE USE OTALY	SIGNATURE OF REGISTERED VOTER	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Straet Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
	SIGN Marchael Press	RESIDENCE 3533 However St.	6-16-16	
12.	SIGN Custin Carter PRINT CUVI, 5 CNC PEC	RESIDENCE 250/3 AIR CITYTOWN Richmond V 423221	6/18/16	
13	SIGN TALA THOMAS PRINT THAMAS TARA	RESIDENCE 2607 3rd UA	6/10/10	
14.	SIGN GOLDING THO PARTS	RESIDENCE CITY/TOWN	and of the same of	
15.	BIGH STAMMENTS  PRINT GALOU VA Thomas	RESIDENCE 2608 35 AUR. CITY/TOWN RICH // 23000	6-10-16	
16.	SIGN COLOR SIGN	RESIDENCE 2608 3 Ave. CITY/TOWN Mar 6 1/A 23122	6/10/2018	
17	son Pate Fithe	RESIDENCE 2319 5'dAve CITYTOWN RICH VA2322	6-10-20	16
18	EST DOVIS W Jackson	RESIDENCE 2715-3 de Citive CITY/TOWN Reigh Va 236	6/10/16	
19	13) Seli Kaffi PRINT SOLI Kafi	RESIDENCE 2715 3 rg Aul	6/10/10	
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21	EST HERON DES MESCON  PRINT HE	RESIDENCE 2606, 187 AVENUE	6-10-16	5
m		AFFIDAVIT.		T64252950
re	Han Schintzys ssie 337/ Garland ave Viva in a Viole County/City/Town of	, swear or affirm that (I) my find the State/Community (ii) I am a le	nonwealth of egal resident of	CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF
. 8	illed States of America; (iii) I am not a minor; (iv) I am not seed the signature of each person who signed this page or punishable by a maximum fine up to \$2,500 and/or impri	r its rèverse side. I understand that falsely signing	his affidavit is a	NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S
3	NOTARY SEALISTAMP SELOW. State of $\sqrt{\Omega}$	NATURE OF PERSON CIRCULATING THE PETITION  GINA County/City of Pechano	rel	CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER
	14th day of	trument was subscribed and sworn before me this  1 1 1 2 5 by  AN SCHOT 21 11  RSON CIRCULATING THE PETITION	Common	tta Irene Clarke FARY PUBLIC wealth of Virginia J. #7037191 on Expires 8/31/2018
*	TUPE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER CAT	HS HOTARY REGISTRATION NUMBER** DATE NOTARY COMM	ISSION EXPIRES**	

ivacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate ending this pestion with the official voter registration record. You are not required to provide this information and may sign the petition without trig so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing y social security number or partitioned.

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ENTE	R ABC	PVE, RESIDENCE ADDRESS OF CANDIDATE  RICCOMONSIL UG  DVE, CITY/TOWN  AND COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN S page, do hereby petition the above named individual to be the [check only one]  General Election Special Election Democratic Printers of the process of the county one]  General Election Special Election Democratic Printers of the process of the county one of the co	ENTER ABOVE, DISTRICT, IF APPLICABLE  Seeks nomination or election and ofsigned hereunder or on the reverse come a candidate for the office stated mary \( \subseteq \) Republican Primary	(Must be When an a sounty or security or security or security or filling it is sugges to facilitate the numbe enter distributed and when the same pages maeach pages a legal retainty who is security or security	TION OF QUALIFIED VOTERS  field with Declared on of Candidat election distinct includes more than city it is suggested that you as either from for qualified voters in a city to facilitate the processing of the processing of the first including the period of the petition. Numerous by the circulated including the period of the petition. Numerous by the circulated including the petition of the petition. Numerous by the circulated including the petition of the petition who is herthir sident of the United States of Ames not been restored. The also must swear or effirm in the	
to be that	e held his/h	on the <u>STM</u> day of <u>Noise in Ever</u> er name be printed upon the official ballots to be used at the	, 20 <u>fb</u> , and we do further petition election.	circulator affidavit ti	also must swea	
CIR		TOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON FILE REVER MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BE NER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN A THAN ONE CANDIDATE,	EN RESTORED AND THAT SIFE PERSONALLY WITH	NESSED EAC	H S.GHATURE	
OFF US ON	ε	SIGNATURE OF REGISTERED VOTER	POST OFFICE BOXES ARE N ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name of		DATE SIGNED [Must be after January 1 of election	"SEE YOTE BEL LAST 4 DIGITS SOCIAL SECUI NUMBER
	10.02%	[PRINT NAME IN SPACE BELOW SIGNATURE]	Rural Route and Box Number and City®	Town	yearl	OPTIC::L
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y,	4.	SIGN MALLES DIE	RESIDENCE 27/3 Fendal		1-14-16	and the second s
X		PRINT MORNINGE COLLINS	CITYTOWN RICH VA	225	<b>&gt;</b>	
	5.	PRINT Jason Vinclestad	RESIDENCE 2305 Bayton CITYTOWN RICLIAMEND, VA		6-10-le	. <u> </u>
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<sup>\*</sup> Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to fac checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containin social security number or part thereof.

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100 110	SCHYTOWN RICHMUND		
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son Giraldar Kichardsin	RESIDENCE 2008 IT AUC	6-10-16	
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E PHOTOGRAPH WALLY REPRODUCIBLE SI  WOTAPY SEAL/STAMP BELOW  State of	GNATURE OF PERSON CIRCULATING THE PETITION  OUT COUNTY/City of PUCK	none	CIRCULATOR'S LAST 4 DI OF SOCIAL SECURITY NUMBER
The foregoing in day o	strument was subscribed and sworn before me this full 2019, by	NOTAF	Irene Clarke RY PUBLIC
Character The Paris Nation	ERSON CIRCULATING THE PETITION	Reg. :	alth of Virginia #7037191 Expires 8/31/2018
FURE CENTER OR OTHER PERSON AUTHORIZED TO ADMINISTER OF	THS NOTARY REGISTRATION NUMBER** DATE NOTARY COMM 4.2-521, authorizes requesting the last four digits of		

and so The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing acceptance or part thereof.

ENTI ENT We side abo	ER AB	OVE, RESIDENCE ADDRESS OF CANDIDATE  RICHARD OVE, CITY/TOWN  OVE, CITY/TOWN  Qualified voters of the district in which the above candidate in the country or city or, for town council, name of town is page, do hereby petition the above named incividual to be the [check only one]  General Election	ENTER ABOVE DISTRICT FACEUCABLE  Seeks nomination or section and of signed hereunder or on the reverse recome a candidate for the office stated many [1] Republican Primary  20 16 and we go further petition	Must be Anner and second, or second, or second of an extension of a second of	VOTE field with Decis election district oity it is suggisted from for oity to facilities  Ect a state/ sted that rounds to a processing to a crossing tres required by page of the part ty be proutated, election among the talso must be a per talso must swe hat s/he person	QUALIFIE (RS) (RS) (retion of Denoice (roughes more than a country) (to a feet vices in the processing a country) (see a condition of the feet on a country) (the processing a country) (the feet one in country) (the feet one in country) (the feet one in country)
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CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

<sup>\*</sup> Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to fall checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column contain social security number or part thereof.

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CLATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/ VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/H SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN. THAN CHE CANDIDATE.	IE PERSONALLY WITNESSED EACH SIGNATURE.	1	<b>5</b>
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HAILS CHINTZINS  IS IS 337 GARLAND CIDE  VIVO IN A	, swear or affirm that (i) my fine the State/Comp	nonwealth of egal resident of	CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE VA
esc states of America; (iii) I am not a minor, (iv) I am not a minor, (iv) I am not seed the signature of each person who signed this page of purishcole by a maximum fine up to \$2,500 and/or improved the seed of the seed o	or its reverse side. I understand that falsely signing t	this affidavit is a	NAME OF STATE THAT ISSUE THE CIRCULATOR'S DRIVER'
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the day of	An Echintaus	NOTAR' Commonwea # Reg. #	rene Clarke 7 PUBLIC Likh of Virginia 7037191 Expires 8/31/2018
IN 2 F 10TAY OR OTHER PERSON A THORIZED TO ADMINISTER OA acy notice. The Code of Virginia, §§ 24.2-506 and 24	THS NOTARY REGISTRATION NUMBER* DATE HOTARY COMM 4.2-521, authorizes requesting the last four digits of ecord. You are not required to provide this informa-	your social seci	urity number to facilitate

to a remark that the owner registration record. You are not required to provide this finantiation and may again the poster in the state Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing access security number or part thereof.

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hy social security 7 Limber or part thereof.

			Alan Schintzius	LITTA	PETI	VOTE	QUALIFIEC
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	arata.	<b>1000</b>			enter distri	ci no ]cpa	
sic ab	de o pove	f thi	qualified voters of the district in which the above candidate  RECLAYNOWA  COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN is page, do hereby petition the above named individual to be the [check only one]  General Election Special Election Democratic Print I on the Hamber day of Aloce where er name be printed upon the official ballots to be used at the	signed hereunder or on the reverse come a candidate for the office stated mary Republican Primary 20 1/40 and we do further petition	the same pages maleach page a legal resign who would not croulator afficient	page of the befing the control of th	Haw need not be- tition. Aumerous  The ordulator of  son who is neither  led States of Amiliary  or a feton whose  en restored. The  arch effect in the  airy is tressed the
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ed from reverse side CANDIDATE NAME: Alah	Schintziusoffice sought:	MAYOR	<u> </u>
ATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/H VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/H GRER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN / THAN ONE CANDIDATE.	HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA E PERSONALLY WITNESSED EACH SIGNATURE, AND DOES NOT SIGNIFY AN INTENT FO VOTE FOR THE CANDID		3
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TUPE OF NOTARY OR OTHER PERSON ANTHORIZED TO ADMINISTER OAT		Commission E	03/191 xpires 8/31/2018

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